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KRISTI CHLEBOWSKI DANE COUNTY

REGISTER OF DEEDS

PRIVATE ON SITE WASTEWATER TREATMENT SYSTEM COVENANT: UNDERSIZED SYSTEM "Bedroom Addition"

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| This covenant is between Casey & Melissa Helbach grantors, and the County of Dane, regarding the private onsite wastewater treatment system (POWTS) on the following described parcel(s) located in | DOCUMENT # 5829441 04/27/2022 10:59 AM Trans Fee: Exempt #: |
| the Town of Middleton | Rec. Fee: 30.00 |
| in the SE of the SE of Section 27 , T 07 N, R 08 E. | Pages: 2 |
| Type or neatly print the legal description of your property in the space below. If you need more space, use the reverse side or attach a copy of the deed.) | co . or parity |
| APPLEWOOD HILL LOT 18 | Your name and return address Casey & Melissa Helbach 6993 Applewood Dr Madison WI 53719 |
| T | ax Parcel # 0708-274-6188-3 |
| At the above named location \square (I) $ ot i$ (We), plan to (check all that apply): | |
| Build an addition or remodel an existing residence resulting in an increase in Build a replacement residence and connect it to an existing POWTS, Build an additional structure and connect it to an existing POWTS. Other: (describe here): Existing 5 BR residence | n bedrooms/wastewater, |
| In compliance with the requirements of Dane County Code ch. 46, or act acknowledge that existing septic component(s) is/are not sized in accordan wastewater load generated by the building served. The existing soil absorption of for an in situ soil absorption area, but it is not sized in accordance with the curgenerated by the building served, and/or the septic/pump tank capacity is under to acknowledge that there [(is) [(is not) an approved area for the purposes this parcel. *Would need new soil test when replacement systems is needed (prior soil test on file is perc test no long | component is located in soil that is suitable trent regulations for the trent regulations for the wastewater load sized for number of bedrooms. This is also of siting a replacement absorption area on the em or additional capacity er allowed for system installation) |
| \square (I) \square (We) understand that the sizing determination of the existing POW living in the house in lieu of total bedrooms: | TS is being based on the number of people |
| • Septic System is currently sized for 4bedrooms (this number x 2 is t | he maximum occupancy) |
| The maximum number of people utilizing the existing POWTS (living in the content of the con | e home) is <u>8</u> people. |
| Occupancy is limited to current septic system bedroom sizing for | actoring 2 people per bedroom. |
| o For example, if septic system is currently sized for 4 Bedroom | is, max number of occupants would be 8 |

If/when the existing soil absorption area is determined to be failing as defined in s. 145.245 Stats, I(We) will replace it in accordance with the state and county codes in force at that time. This is binding on all future heirs, owners and assigns.

system is only sized for 4 bedroom use.

people, and covenant of undersized sized system may be used in certain situations for 5 bedroom home. It does not mean that a 5 Bedroom home can have 9 or more people occupying the house if the septic

| Meling Hilled ACKNOWLEDGEMENT | |
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| Owner Name (Signature) Owner Name (Signature) Owner Name (Print) Owner Name (Print) | |
| STATE OF WISCONSIN)) ss. COUNTY OF DANE) | |
| Personally came before me this day of 20 dd, the above named person(s) to me known to be the persons who executed the foregoing instrument and acknowledged the same. Notary Public Dane County, Wisconsin My Commission is permanent. (If not, expiration date is 20/21/2005) Prepared by: Public Health Madison Dane County, Environmental Health Division, Aug 2021 | |
| rrepared by Fubilic Health Madison Dane County, Environmental Health Division, Aug 2021 | |
| Form completed by: | |

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